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APPLICANTS Seymour H. Fein, New Canaan, CT;				
** CONTINUING DATA ***** This application is a CIP of PCT/US03/14463 05/06/2003 <i>OK</i>				
** FOREIGN APPLICATIONS ***** UNITED KINGDOM 0210397.6 05/07/2002 <i>OK</i>				
IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY ** ** 03/04/2004				
Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged <i>Allowance</i> Examiner's Signature _____ Initials _____		STATE OR COUNTRY CT	SHEETS DRAWING 9	TOTAL CLAIMS 18
INDEPENDENT CLAIMS 5				
ADDRESS 27267				
TITLE Pharmaceutical compositions including low dosages of desmopressin				
FILING FEE RECEIVED 536	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	